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I. EXECUTIVE SUMMARY

Project Filter, Idaho's Tobacco Prevention and Control Program, is seeking \$2,250,000 from the Millennium Income Fund Committee to complete our \$3,734,000 tobacco prevention and control budget. Project Filter will use these funds to develop, promote and execute a cost-effective counter-marketing program while enhancing our cessation and local program areas. The addition of cessation services and enhancement of counter-marketing and local programs will further strengthen Project Filter as a comprehensive, statewide tobacco prevention and control program. In addition to the comprehensive program, Project Filter will conduct a complete evaluation to measure the impact of the campaigns on the target audience. An overview follows.

Cessation: Improve cessation rates and strengthen existing free cessation services by providing Nicotine Replacement Therapy (NRT), free of charge, to new registrants. According to CDC's *Best Practices for Comprehensive Tobacco Control Programs—2007* this comprehensive approach, encompassing social support, development of problem solving skills and NRT, proves to be the most effective cessation program. Items include:

- 4 weeks of NRT offered to all QuitNet/QuitLine registrants in Idaho, free of charge
- Monthly registration and counseling fees for up to 400 new callers to QuitLine per month
- Registration fees for 6,000 new registrants annually on QuitNet

Counter-marketing: Using combined strategies to counter tobacco influences and positively affect social norms, has proven to be effective in reaching our target populations with varied messages on secondhand smoke, preventing initiation, and promotion of cessation resources. Activities include:

- High visibility public relations at community events, mass media and community advocacy
- Reducing or replacing tobacco industry sponsorship and promotions
- Independent evaluations of Project Filter's counter-marketing efforts

Local Programs: Successful public health practices have shown that active and coordinated involvement of community resources are the foundation for sustained solutions to public health risks such as tobacco use. Community resources used on a broad range of statewide and local community level programs and policies influence, encourage and support individuals to make behavior changes. Local efforts will include:

- Support and/or facilitate tobacco prevention and control activities across communities
- Implement evidence-based policy interventions aimed at decreasing initiation, increasing cessation and reducing exposure to secondhand smoke
- Collect community specific data and develop/implement culturally appropriate interventions
- Sponsor a broad range of community events that target identified at-risk populations
- Provide funding to organizations that can effectively reach and impact identified populations
- Combine tobacco prevention and control activities with appropriate chronic disease prevention and control programs, as appropriate, to increase reach and effectiveness

II. PROPOSAL

A. Organizational Background

Project Filter has been in existence since 1994. The program is housed within the Bureau of Community and Environmental Health, Division of Health, Idaho Department of Health and Welfare. Consistent with the National Tobacco Control Program's objectives, the four primary goals of Project Filter are to: 1.) Eliminate exposure to environmental tobacco smoke (ETS); 2.) Promote quitting among adults and youth; 3.) Prevent initiation among youth; and 4.) Identify and eliminate tobacco-related disparities among population groups. This is accomplished through a comprehensive multi-faceted approach as recommended by National Best Practices and Centers for Disease Control and Prevention (CDC). This includes promoting cessation services, population-based community interventions, counter-marketing, program policy/regulation, and surveillance and evaluation. The mix of strategies are implemented both statewide through the state office and locally through community contracts monitored by Project Filter. Project Filter ensures that strategies developed strive to be evidence-based, culturally appropriate and cost-effective.

Among the smoking population:

- 54% report wanting to quit using tobacco
- 47% of those trying to quit report being very serious about their quit attempt
- Only 12% report of quitters report they are confident they can quit, 50% not confident in their quit attempt
- 70% of smokers report smoking less after a failed quit attempt

During fiscal year 2007, Project Filter's counter-marketing efforts accomplished the following:

- Over 739,000 or 71% of Idaho adults were exposed to Project Filter television ads
- Project Filter ads reach the target market – 81% of current smokers in Idaho reported seeing at least one of the four Project Filter ads aired
- An estimated 114,000 Idaho adults saw others use or wear Project Filter gear, and nearly 395,000 indicated they would use or wear something with the Project Filter logo and messaging
- Smokers recall Project Filter ads at nearly twice the rate as non-smokers

Outreach provided at the local community level during fiscal year 2007 by Project Filter and contract partners:

- Tar Wars youth prevention program, implemented in 132 schools reaching 348 5th grade classes and over 8,000 students
- Teens Against Tobacco Use (TATU) teen tobacco prevention peer education program implemented in 20 new high schools through efforts by locally contracted District Health Departments.
- Smoke-free policies adopted in two cities in Idaho
- Tobacco-free day at the Western Idaho Fair
- Voluntary smoke-free doorway policies at businesses and offices across Idaho
- Sponsorship of Wiley Petersen, Professional Bull Rider, first professional cowboy in the world to remove the US Smokeless Tobacco sponsorship patch and replace it Project Filter, Idaho Fights Tobacco, That's No Bull!

Project Filter's location within the Division of Health, Department of Health and Welfare provides the program with added resources to manage the proposed increase in Millennium Funding. Project Filter is required to meet quarterly with a Financial Officer from Management

Services to review program budgets and monitor expenditures. Project Filter is also supported by the Department's Contracts Unit which ensures all contracts are legal, binding and meet Department standards. These services allow Project Filter to dedicate all Millennium Funds to direct services and not personnel or indirect costs.

Project Filter employs nine full and part-time staff using federal funding. Staff titles and primary responsibilities are listed below.

- Jack Miller, MHE, Program Manager (PT): Mr. Miller oversees the day to day operations of Respiratory Health programs (Project Filter and Asthma Prevention and Control Program) and determines the focus and direction of program activities.
- Ingrid Bolen, MS, Marketing Specialist (PT): Ms. Bolen oversees the day-to-day media and marketing activities of Project Filter ensuring that all counter-marketing messaging/activities are appropriate for the selected target audience.
- Joseph Pollard, BS, Surveillance and Evaluation Specialist (PT): Mr. Pollard works with Project Filter to identify priority populations, develop program goals, objectives and outcomes to measure the impact of program efforts.
- Nicole Mauerman, MS, Research Analyst (PT): Ms Mauerman serves as the data analyst for Project Filter identifying data sources, retrieving appropriate data sets out of different reports and then analyzing data to identify trends.
- Jamie Delavan, BA, Program Specialist, Cultural Liaison (FT): Ms. Delavan oversees contracts and partnerships with health disparate populations and ensures that messages are culturally and linguistically appropriate in delivery.
- Ivie Smart, MHE, Program Specialist (PT): Ms. Smart assists in the delivery of the program, conducts research on appropriate language and content to be used in program materials.
- Jean Calomeni, MS, Health Education Specialist (FT): Ms. Calomeni assists in the delivery of the program, conducts research on appropriate materials for message development and coordinates social marketing campaigns.
- Trevor Newby, MHS, Health Education Specialist (PT): Mr. Newby assists in the delivery of the program, conducts research on appropriate materials for message development and coordinates social marketing campaigns.
- Deanna Jarvis, Administrative Assistant (PT): Ms. Jarvis assists the Program Manager with budget monitoring. Ms. Jarvis ensures that invoices are properly coded, on time, and complete in the description of services rendered to the program.

Idaho Department of Health and Welfare, Division of Health, in kind program staff support:

- Robert Graff, PhD, Chronic Disease Epidemiologist (PT): Dr. Graff, start date 12/17/2007, will identify, collect, and correlate data from disparate sources to assess the burden of chronic disease, identify trends along with casual risk factors, identify gaps and enhance the utility of existing data.

Project Filter is primarily funded through a cooperative agreement with the Office of Smoking and Health (OSH) through CDC. Supplemental funding, also from CDC, assists with expenses incurred for the maintenance and promotion of Idaho's QuitLine. QuitLine, telephonic cessation counseling services, are offered free of charge to all Idahoans. Project Filter receives a portion of the state cigarette tax which is dispensed through the state Cancer Control Account. Project

Filter receives less than 0.5% of the cigarette tax generated each year for counter-tobacco efforts. Project Filter received additional funds from the Public Health Institute this year (2008) to address tobacco company sponsorships of rodeos. Project Filter worked with area rodeos to reduce tobacco sponsorship dollars, reduce tobacco advertising during youth events and reduce tobacco sampling. In 2009, Project Filter was awarded funds for counter-marketing through the Idaho Millennium Fund grant. A detailed breakout of the budget is below.

Current Budget July 1, 2008 – June 30, 2009					
Category	Other	State	Federal		Total
	Millennium Funds	Cancer Control Account (CCA)	CDC Grant	QuitLine Supplemental	
Personnel	\$0	\$0	\$214,780	\$0	\$214,780
Fringe	\$0	\$0	\$88,318	\$0	\$88,318
Travel	\$0	\$0	\$20,632	\$0	\$20,632
Equipment	\$0	\$0	\$0	\$0	\$ 0
Supplies	\$0	\$0	\$1,250	\$0	\$1,250
Contracts	\$1,450,000	\$186,728	\$623,472	\$250,000	\$2,510,200
Consultants	\$0	\$0	\$0	\$0	\$ 0
Other	\$0	\$43,272	\$10,000	\$0	\$72,272
Indirect	\$0	\$0	\$45,876	\$0	\$45,876
Totals	\$1,450,000	\$230,000	\$1,004,328	\$250,000	\$2,953,328

B. Purpose of Request: Goals and Outcomes

Death, disease and disability from tobacco continue to be one of the leading causes of death and disability in Idaho each year. According to CDC Data Highlights 2006, it is estimated that 1,500 Idahoans will die from a tobacco related disease each year, an average of four people per day. The burden to Idaho is an annual health care cost of \$319 million dollars, \$83 million of which is covered by the state Medicaid program and \$332 million dollars in lost productivity due to missed time at work. The average Idaho household will pay \$549 per household in state and federal taxes to cover the burden from smoking-caused government expenditures.

According to the 2006 Adult Tobacco Survey (ATS) approximately 54% of adult smokers aged 18-65 made at least one quit attempt, of those only 12% feel confident that they will be able to successfully quit. Project Filter aims to increase that percentage by:

- Making 4 weeks of Nicotine Replacement Therapy (NRT) available to all registrants to QuitNet or QuitLine free of charge
- Providing free QuitLine services to 400 callers per month
- Providing free QuitNet registration to over 6,000 new registrants

Project Filter goals and outcomes for counter-marketing:

- Increase the proportion of Idaho adults who have been exposed to Project Filter media and marketing messages
- Increase the frequency of ads placed in media markets across the state

Project Filter has identified the following goals which it aims to accomplish with Millennium Fund financial support for local programs:

- Decrease the proportion of youth who try their first cigarette before the age of 13
- Increase public support for smoke-free outdoor public activities such as county and community fairs, sporting events, rodeos, motor sports, etc.
- Increase the proportion of Idaho households that voluntarily prohibit smoking inside of the dwelling
- Increase public understanding of the burden that environmental tobacco smoke places on persons with asthma or other chronic respiratory diseases and conditions

Project Filter is requesting additional financial support from the Millennium Income Fund Committee in order to conduct activities which are designed to accomplish the following long-term objectives:

- Decrease the proportion of non-smoking youth and adults who are exposed to environmental tobacco smoke
- Increase the proportion of Idahoans who are able to quit smoking (i.e. increase the proportion of former smokers through cessation)
- Decrease the proportion of youths and adults who become smokers

Millennium Fund money would allow the Idaho Tobacco Prevention and Control Program, Project Filter, to follow CDC's best practices by engaging in a fully comprehensive tobacco-control program.

C. Organizational Capacity

The goals and objectives outlined below in Project Filter's application relate directly to the Idaho Department of Health and Welfare's mission statement "To promote and protect the health and safety of Idahoans" and Goal 1, Objective 1 of the Department's Strategic Plan, "Improve healthy behaviors of adults to 75.40% by 2012". The Bureau of Community and Environmental Health, which houses Project Filter, has incorporated the Department's mission statement and expanded within their vision statement: "the Bureau of Community and Environmental Health exists to promote and protect the health of the people of Idaho by providing leadership, education and outreach programs, and technical assistance and analysis in order to prevent injuries, change risk behaviors, prevent and control chronic disease, and prevent and reduce exposure to contaminants." Both the Department and Bureau require programs to incorporate these statements into their program deliverables.

Project Filter has been working on counter-marketing programs since 1999 and has enjoyed success in this area of comprehensive tobacco control. Project Filter has received several awards for creativity in local media campaigns, been recognized for public health communication and presented on several social marketing programs at the local, state, regional and national level. Project Filter is recognized for developing, promoting, implementing and evaluating best practices-based counter-marketing media and public relations campaigns.

Project Filter works in collaboration with statewide, regional and national partners through a variety of networks established and supported by the CDC Office on Smoking or Health (CDC OSH). Project Filter participates on monthly media calls sponsored by CDC OSH that highlight best practices and success in the field. Project Filter also works with regional partners through the Tobacco Control Network (TCN) and Buck Tobacco organizations. The focus of these calls is to share success stories and to discuss areas where programs can cross collaborate.

Project Filter, through CDC funds, employs; a Program Manager, Surveillance and Evaluation Specialist, Research Analyst, Program Specialist, Marketing Specialist, Cultural Liaison, two Health Education Specialists and Administrative Assistant. Project Filter also receives the services of a Chronic Disease Epidemiologist through an in kind staff donation from the Division

of Health. Staff plays a key role in setting budgets, developing and implementing program activities and evaluation plans, assisting in the development of key media messages, developing and monitoring local program contracts, assisting in the delivery of public relations campaigns and ensuring that all bills are properly submitted and paid on time. The structure and experience of Project Filter staff demonstrate the ability for Project Filter to be highly successful. Project Filter has the structure to support this request for funding from the Millennium Income Fund Committee.

D. Process

With oversight of the Media/Marketing strategist, Project Filter holds contracts with both a television/radio media firm, CLM, and a public relations/marketing firm, PBZ. The Media/Marketing strategist communicates with both firms on a weekly basis to ensure that projects are on target and timely. Product field tests and focus groups involving priority populations will ensure that strategies are appropriately targeted. When applicable, existing partners and contractors representing the target demographic will be involved in the development and implementation of strategies.

The draft plan and timetables for FY2010 Millennium Fund Grant are as follows:

CESSATION				
Offer nicotine replacement therapy (NRT- patches, gum, lozenges) to new QuitLine and QuitNet registrants as a supplemental tool to further assist tobacco users in achieving cessation success.				
	Task	Objective	Evaluation	Time Line FY2010
QuitLine Registrants	Provide NRTs, through QuitLine contractor, for 4-weeks to new registrants.	Distribute to 400 new registrants per month for 12 months.	Contractor reports describing (new) registrants, quit status at 3, 6 and 12 month intervals and NRTs provided.	July-June
QuitNet Registrants	Provide NRTs, through QuitNet contractor, for 4-weeks to new registrants.	Distribute to 6,000 new registrants per year (50% increase in registrants).	Contractor reports describing (new) registrants, quit status at 3, 6 and 12 month intervals and NRTs provided.	July-June

COUNTER-MARKETING				
GENERAL AWARENESS - Messages will address tobacco industry's heavy marketing to specific populations, promotion of free confidential cessation resources, and social norms regarding tobacco including "don't start".				
	Task	Objective	Evaluation	Time Line FY2010
General Public	Maintain and update Project Filter Jump Page – with links to IDHW & other tobacco-related sites. Add Idaho fact sheet/testimonial.	Offer a consistent and easy to access site for cessation education and "don't start" information. Promote Project Filter.	Number of hits on jump page.	July-June

COUNTER-MARKETING				
Lesbian, Gay, Bisexual, Transgender (LGBT)	Submit quarterly articles to progressive and college newspapers focusing on smoking rates, tobacco industry targeting of LGBT and quitting.	Public awareness of the problem and education regarding free confidential quit resources.	Number of articles printed. QuitNet/QuitLine monitoring.	July-June

PREVENT INITIATION – Native American and Hispanic youth are at particular risk for starting smoking. Smoking rates for Hispanic youth are 20.4% (2006 Youth Risk Behavior Survey) . Commercial tobacco use among Native Americans is 37% (2003-2006 BRFSS). Overall Native American youth smoking rates in Idaho are unavailable.

	Task	Objective	Evaluation	Time Line FY2010
Native American and Hispanic Youth	Community/Culturally oriented youth (teen) Project Filter oriented premiums.	Youth coalitions drive community prevention and education strategies and activities. This would provide some visible consistent messaging that would link to our other statewide efforts.	Premiums can be tied into pledges or educational classes. Most of the youth coalitions have to pledge to be smoke-free, etc. Items can be tied to documented pledges and youth activities.	July-June. As needed to support activities.

SECONDHAND SMOKE – There is no risk-free level of exposure to secondhand smoke. Primary efforts will focus on Native Americans where commercial tobacco use is 37% (2003-2006 BRFSS). Individual data from Idaho Tribes indicate prevalence closer to 40%. Native Americans are highly targeted by tobacco industry marketing.

	Task	Objective	Evaluation	Time Line FY2010
Smoke-free Housing	Provide sample policies and signage to apartment complexes adopting smoke-free housing policies.	Identify Apartment complexes willing to adopt smoke-free housing ordinances	Process – Number of complexes adopting smoke-free policies	July - June

CESSATION - A 2004 Idaho health assessment of this population indicated smoking rates more than two times the general population. (33% Lesbian, 37.7% Gay, 37.7% Transgender). LGBT are both highly targeted by tobacco industry marketing efforts and have a strong social norm of smoking. Research indicates that LGBT respond well to specifically targeted messages.

	Task	Objective	Evaluation	Time Line FY2010
QuitNet and QuitLine	Conduct online advertising program promoting QuitNet and QuitLine on specific search engines.	Increase callers to QuitLine and registrants to QuitNet	Number of new registrants and callers. Hits on search engines.	July - June
LGBT	Develop and place new quit ads and other print material expanding upon past print ads. Placement expanded to other areas of the state (LGBT community centers, bars, colleges and progressive papers)	Expand upon past ads to provide cohesion and bring campaign to next level. Include SHS message (secondary)	QuitLine/QuitNet monitoring. (can add this item to referral source for QuitLine)	Oct-May

SPONSORSHIPS - Efforts will focus on developing a smoke-free social norm at events where smoking is prevalent and tobacco sponsorship is typical. This will be accomplished through a visible, repetitive presence at events and sponsorship of event personalities that will connect with the priority population. Onsite outreach will include resources for cessation and education on the impact of secondhand smoke. Primary efforts will focus on Blue Collar/Low socioeconomic status. Smoking prevalence for individuals with a high school education or less is 26%. (2003-2006 BRFSS)				
	Task	Objective	Evaluation	Time Line FY2010
Blue Collar/Low socio-economic status	Sponsorship of SmokeFree 83 racing (Late Model Lite/Pro4, Dirt Modified and Late Model Class)	Use the notoriety of the circuit persona to connect with priority population. Educational outreach. Increased use of QuitNet/QuitLine	QuitNet/QuitLine reports. Health district reports. On-site surveys.	March – June Public relations June – Aug Meridian Raceway sponsorship events.
	Sponsorship of Wiley Peterson, Professional Bull Rider, and accompanying promotional activities	Use the notoriety of the circuit persona to connect with priority population. Educational outreach. Increased use of QuitNet/QuitLine	QuitNet/QuitLine reports. Health district reports. On-site surveys.	Dec – Nov Rodeo circuit.
	Sponsorship of Wyatt Smith, Professional Rodeo Cowboys Association and accompanying promotional activities	Use the notoriety of the circuit persona to connect with priority population. Educational outreach. Increased use of QuitNet/QuitLine	QuitNet/QuitLine reports. Health district reports. On-site surveys.	Feb – Nov
General Population	Boise Hawks (baseball) sponsorship and promotional items.	Visibility/repetition of key messages. Increased use of QuitNet/Line. Educational outreach.	QuitNet/QuitLine reports. Health district reports. On-site surveys	Jul-Sept, June
	Boise Steelheads (hockey) sponsorship and promotional items.	Visibility/repetition of key messages. Increased use of QuitNet/Line. Educational outreach.	QuitNet/QuitLine reports. Health district reports. On-site surveys	Oct-Apr
	Boise Burn (Arena Football) sponsorship and promotional items.	Visibility/repetition of key messages. Increased use of QuitNet/Line. Educational outreach.	QuitNet/QuitLine reports. Health district reports. On-site surveys	July, Mar-Jun
LGBT	Presence at PRIDE in three Idaho communities. Includes development of LGBT targeted display and giveaways.	Education of high smoking rate in the community and tobacco industry targeting of LGBTQ. Awareness of free confidential quit resources.	Include survey at booth/events with questions about current tobacco use to assist the program in meeting the needs of this population.	Aug, Apr, June
	Sponsorship of event(s) at The Community Center and college campus LGBT events.	Develop community presence in places with prevalent smoking. Public education of free confidential quit resources.	Survey at event(s) Reports from event coordinators. QuitLine/QuitNet monitoring.	Oct - May

COMMUNITY PROGRAMS				
SOCIAL NORMING - Efforts will focus on developing a smoke-free social norm at events or through venues where smoking is prevalent. Onsite outreach will include prevention messages, resources for cessation, and education on the impact of secondhand smoke.				
	Task	Objective	Evaluation	Time Line FY2010
General Population	“No Smoking” Family Day at the Western Idaho Fair. Negotiate an additional day of no smoking.	Social norm change (start a norm that outdoor events should be smoke free)	On-site surveys	Preparation: March Fair: Aug
	Big Nasty Hill Climb	Develop community presence in places with prevalent smoking. Public education of free confidential quit resources.	On-site surveys	Sep
	St. Luke’s Women’s Fitness Celebration	Public education of free confidential quit resources.	On-site Surveys	Sep
Youth	Develop a handbook for Youth leaders and coaches called “Kids Play Tobacco Free”	Provide a guide for the development of tobacco-free youth sports teams.	Evaluation in handbook. Number of handbooks distributed. Smoke-free pledges from youth teams.	July-June
PROMOTE CESSATION – Efforts will focus on enhancing cessation supports including development of culturally tailored cessation classes, events, messages, quit kits and other tools.				
	Task	Objective	Evaluation	Time Line FY2010
Cessation participants	Complete Quit and Get Fit toolkit development. Investigate statewide distribution.	Offer a comprehensive approach to cessation by including nutrition and physical activity components.	Surveys to attendees and facilitators.	Jan – Dec
	Task	Objective	Evaluation	Time Line FY2010
Native American	Development of culturally appropriate supplemental items for QuitNet/QuitLine quit kits for distribution at Great American Smoke-Out (GASO) and other events promoted by Tribes in Idaho	Building and supporting community resources for behavior change	Number of GASO pledges received. Number of kits handed out. Number of referrals to QuitNet/QuitLine from these areas.	Preparation: Aug. GASO: Nov
	Task	Objective	Evaluation	Time Line FY2010
LGBT	Pilot single or multiple day cessation Smoke-outs and/or cessation classes. Includes development of audience specific quit kits.	Provide a community specific opportunity and tools to quit smoking.	Number of pledges or class enrollment and quit kits distributed. QuitNet/QuitLine monitoring.	July – Nov

E. Evaluation Plan

Project Filter will conduct a thorough evaluation of all activities that are supported with Millennium Funding. Past evaluation efforts have already been used for program planning and

implementation. Future evaluation activities will be designed to provide guidance for program planning and evidence of program effectiveness.

Project Filter will monitor three questions related to its cessation program through evaluation:

1. Are quit rates increasing due to the availability of free NRT? If so, which NRT's are proving to be more successful and cost-effective than others?
2. What are our quit rates over time? This will be monitored with our standard three, six and twelve month follow up surveys.
3. Are smokers reporting more confidence in their ability to quit given the availability of free NRT? If not, what resources are needed to make them successful?

Project Filter will continue to monitor three primary questions related to Project Filter's counter-marketing program goal areas through our evaluation activities:

1. Are Project Filter marketing efforts increasing the number of registrants/callers to QuitNet and QuitLine? If so, which specific marketing activities most effectively encourage QuitNet and/or QuitLine participation?
2. Do Project Filter media and marketing efforts encourage and support non-smokers from starting smoking and former smokers to continue to abstain from smoking?
3. Do Project Filter media and marketing efforts increase public understanding and support for smoke-free events and venues?

Project Filter will focus evaluation plans for local programs on:

1. Reach and effectiveness of local program activities
2. Support for local policy driven activities
3. Identification of populations disproportionately affected by tobacco use

Evaluation of all Project Filter activities related to promoting cessation, counter-marketing and enhancement of local programs will be conducted by an experienced independent evaluation contractor in order to eliminate any conflict of interest arising from evaluating our own efforts in-house. The contract will be awarded through the Department's Request for Proposal (RFP) process. The evaluation contractor will be required to utilize multiple methods/strategies including but not limited to population-based surveys, existing public-health records, and previously collected survey data (Idaho Behavioral Risk Factor Surveillance System, Idaho Youth Risk Behavior Survey, Current Population Survey, etc.). It is anticipated that several Project Filter partners and stakeholders will be involved with evaluation planning, results dissemination, and program planning which utilizes the media and marketing evaluation results. Previous Project Filter evaluation results have been used by the program and their stakeholders for program improvement, requests for program funding, and educational efforts throughout the state.

F. Sustainability

Project Filter has the financial commitment through our collaborative agreement with CDC to support the structure of a comprehensive tobacco prevention and control program. This agreement allows us to match federal funds with state funds to enhance state-wide programs. Project Filter is committed to conducting program activities that are comprehensive in nature, based on best practices and are science based. The scope and breadth of the program is currently tied to the availability of state funds to match federal funds. Project Filter is in the process of working on sustainability funding for a comprehensive program with statewide and national partners.

III. BUDGET

The \$2,250, 000 that Project Filter is requesting from the Idaho Millennium Fund Committee will provide Project Filter with the opportunity to enhance program activities, increase services provided to Idahoans and increase the reach across the State of Idaho. Project Filter is able to dedicate all Millennium Funding to program costs as it uses federal funding to pay for all personnel costs associated with this project. Project Filter receives a \$250,000 supplemental grant from CDC specifically to cover registrant fees for QuitLine and dedicates approximately \$100,000 from our State Cancer Control Account budget to assist in covering the cost of new registrant fees to QuitNet generated by media and public relations campaigns.

Proposed Project Budget July 1, 2009 – June 30, 2010					
Category	Other	State	Federal		Total
	Millennium Funds	Cancer Control Account (CCA)	CDC Grant	QuitLine Supplemental	
Personnel	\$0	\$0	\$214,780	\$0	\$214,780
Fringe	\$0	\$0	\$88,318	\$0	\$88,318
Travel	\$0	\$0	\$20,632	\$0	\$20,632
Equipment	\$0	\$0	\$0	\$0	\$ 0
Supplies	\$0	\$0	\$1,250	\$0	\$1,250
Contracts	\$2,250,000	\$186,728	\$623,472	\$250,000	\$3,310,200
Consultants	\$0	\$0	\$0	\$0	\$ 0
Other	\$0	\$43,272	\$10,000	\$0	\$53,272
Indirect	\$0	\$0	\$45,876	\$0	\$45,876
Totals	\$2,250,000	\$230,000	\$1,004,328	\$250,000	\$3,734,328

DETAILED BUDGET JUSTIFICATION – Millennium Funds				
CESSATION				
Category	Description	Amount	Subtotal	TOTAL
QuitLine	4 weeks free NRT	\$268,800	\$489,200	
	400 registrants per month	\$220,400 (\$250,000 CDC match)		
QuitNet	4 weeks free NRT	\$222,000	\$510,800	\$1,000,000
	6,000 registration fees for new members	\$206,946 (\$93,054 State Cancer Control Account match)		
	Online Banner Ads	\$81,854		
COUNTER-MARKETING				
Category	Description	Amount	Subtotal	TOTAL
CLM	Media placement – purchase of air time for commercials	\$500,000	\$650,000	

	Development of 3 new commercials	\$75,000		
	Evaluation of comprehensive of counter-marketing campaign	\$75,000		
PBZ Marketing	Development and placement of 3 to 5 print ad campaigns i.e. billboards, bus benches and newspaper ads.	\$100,000	\$100,000	\$750,000
LOCAL PROGRAMS				
Health Districts, Idaho Tribes and Community Organizations	Enhancement of local community contracts to support best practice and science based programs	\$250,000	\$250,000	
Community Event sponsorship	Sponsorship of 10 to 15 community events such as rodeos, fairs, car shows, art in the park, races, and other targeted community events	\$250,000	\$250,000	
Grand Total: \$2,250,000				

IV. Conclusions

Project Filter is in the unique position of being able to dedicate all of the funding it receives from the Millennium Fund directly to program services due to our cooperative agreement with CDC. Our cooperative agreement allows us to cover salaries and benefits, in-directs, travel costs and meetings expenses associated with running the program under our federal grant in order to maximize the delivery of services and activities.